

LIBRARY

BRENTWOOD URBAN DISTRICT COUNCIL



---

ANNUAL REPORT  
OF THE  
MEDICAL OFFICER OF HEALTH  
FOR  
1946



# BRENTWOOD URBAN DISTRICT COUNCIL

## MEMBERS OF THE COUNCIL

*Chairman:* COUNCILLOR R. H. WILLARD, J.P.

*Vice-Chairman:* COUNCILLOR H. E. BROWNETT.

### *Councillors:*

Rev. E. Byles, B.A., B.D. (Vice-Chairman of the Health Committee)	H. J. Kirby
A. V. Cave (Chairman of the Health Committee)	A. J. Lamb
S. B. Farrell	T. N. Lavender
H. J. Farrow	J. McDonald
R. Garstang	G. A. D. McTurk
J. F. Hough, M.A.	C. W. Ray
H. M. Hughes	T. H. Scrivener
J. Ffrancon Jones	W. G. Stevens, J. P.
G. A. Joslin	D. C. J. Scott
G. R. King	W. S. Venner
	S. A. Wilson
	S. J. Wingrave

## PUBLIC HEALTH STAFF

### *Medical Officer of Health (Part-time):*

B. FRASER BEATSON, M.R.C.S., L.R.C.P., D.P.H., D.T.M. & H.

### *Bacteriologists and Analysts:*

The Counties Public Health Laboratories.

### *Senior Sanitary Inspector:*

F. G. SPENCER, M.R.San.I., Sanitary Inspector, Meat and Food Inspector, and Smoke Inspector, Royal Sanitary Institute.

### *Additional Sanitary Inspector:*

P. T. SHELTON, M.R.San.I., Sanitary Inspector, Meat and Food Inspector, Royal Sanitary Institute.

### *Clerks and Shorthand-typists:*

Miss R. E. M. BAILEY (resigned 2nd February, 1946).

Mr. N. F. WEBBER (reinstated 7th December, 1945).

Mrs. E. M. HOWE.

BRENTWOOD URBAN DISTRICT COUNCIL

---

**Annual Report of the Medical Officer of Health  
for the Year 1946.**

---

MR. CHAIRMAN AND GENTLEMEN,

My Annual Report for the year 1946, drawn up as directed by the Minister of Health in his Circular 13/47, again follows the shortened form which the War made familiar.

Various statistics continue to be preserved in the office until such time as a more comprehensive report is required.

I am much indebted to each member of my Staff for a great deal of loyal and devoted work throughout the year. My thanks are due to that most excellent officer, the Senior Sanitary Inspector, for his assistance in compiling this report which I now present to you.

I am,

Mr. Chairman and Gentlemen,

Your obedient Servant,

B. FRASER BEATSON,

*Medical Officer of Health.*



## GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

### Public Health Staff.

In February the Department lost the services of Miss R. E. M. Bailey on her resignation to take up another appointment. Miss Bailey, who had held the post of Senior Clerk for nearly four years, had proved herself to be a first-class secretary and shorthand-typist, thoroughly capable, well-trained, and not afraid to undertake responsibility if necessary. She left with the good wishes of everyone in the Department. In her place Mr. N. F. Webber has been welcomed back on demobilisation from the Royal Navy.

Both Sanitary Inspectors have worked very hard and conscientiously, but they have been unable to keep pace with requirements. There has been a steady increase in the number of complaints alleged to be detrimental to the Public Health. These often involve many visits before the true position can be assessed and a definite line of action can be settled. There have also been so much correspondence to be dealt with and so many persons to be interviewed in the office, that the Sanitary Inspectors have not been able to fulfil many of their Statutory duties.

In my Annual Report for 1944 I pointed out that the recognised establishment of Sanitary Inspectors in a district is one inspector per 10,000 head of population. The estimated population of the Urban District of Brentwood is about 30,000.

The Medical Officer of Health, on whom falls the ultimate responsibility for all Public Health matters, and who has to exercise both special and general supervision throughout the district, is employed by the Council on only a 50% basis, or 2.75 days per week.

### Laboratory Facilities.

(a) Routine examinations of milk and water samples were again carried out by the Counties Public Health Laboratories at Gidea Park up till 24th June, 1946, and thereafter at the Laboratories' new address at 66, Victoria Street, London, S.W.1.

(b) Other laboratory examinations were made at St. Andrew's Hospital, Billericay.

## SANITARY CIRCUMSTANCES OF THE AREA

### Water Supplies.

#### (a) From Mains:

Main water supplies to the area are provided principally by the South Essex Waterworks Company, and to a lesser extent by the Southend Waterworks Company. These supplies were satisfactory in both quality and quantity.

Six samples taken from the South Essex Waterworks Company's mains showed the water to be clear and bright in appearance and of very satisfactory bacteriological purity, and therefore suitable for drinking and domestic purposes. Chemically, the water was free from metals, apart from a negligible trace of iron, but it was hard in character, though not to an excessive degree. The average hardness was:—

Temporary, 17; Permanent, 9; Total, 26.

The possibility of reducing the hardness of this water is a matter which is under consideration by several interested local authorities.

Five samples of water were taken from the Southend Waterworks Company's mains, and showed the water to be clear and bright in appearance and of a very satisfactory bacteriological purity, and suitable therefore for drinking and domestic purposes. Chemically, this is a soft water, the average hardness being:—

Temporary, 2; Permanent, Nil; Total, 2.

The position regarding the number of houses in which water supply is obtained from standpipes has not changed from the previous year, when the figure was 0.25% of the population.

**(b) From Wells:**

Eight samples of well waters were examined, of which six proved to be unsatisfactory.

Appropriate action was taken to deal with these impure supplies.

**Sanitary Inspection of the Area.**

	Inspections.	Re-inspections.
Housing Consolidated Regulations ... ..	12	138
Housing (Overcrowding Provisions) ... ..	38	8
Council Houses ... ..	3	—
Allocation of Council Houses ... ..	190	14
Tents, Vans and Sheds (Moveable Dwellings) ... ..	4	7
Sanitary Defects ... ..	366	763
Verminous or Dirty ... ..	26	38
Infectious Diseases ... ..	17	72
Water Supply ... ..	31	42
Drains—Inspected ... ..	30	55
Tested ... ..	2	—
Sewers ... ..	2	—
Cesspools ... ..	21	11
Public Conveniences ... ..	3	—
Factories—Power ... ..	14	11
Non-power ... ..	14	4
Outworkers' Premises ... ..	4	—
Shops Acts (Sanitary Provisions) ... ..	1	—
Bakehouses ... ..	20	2
Rat Infested Premises ... ..	88	37
Ponds, Ditches and Watercourses ... ..	15	15
Swine, Fowls, etc. ... ..	1	1
Accumulations of Refuse ... ..	15	6
Tips, etc. ... ..	1	1
Requisitioned Property ... ..	32	3
Miscellaneous Visits ... ..	174	5
Baiting Sewers ... ..	20	—
War Damage ... ..	2	—
Public Fairs ... ..	5	—
Swimming Pools—Water Sampling ... ..	8	—

**Food Inspection.**

Slaughterhouses ... ..	5
Meat Shops ... ..	31
Provision and other Food Shops ... ..	146
Fried Fish Shops ... ..	8
Dairies and Milk Shops ... ..	12
Ice-cream Premises ... ..	38
Knackers Yards ... ..	24
Cowsheds ... ..	49
Sampling—Milk ... ..	40
Ice-cream ... ..	14
Water ... ..	20

Number of complaints received — 403.

**HOUSING.**

- (a) Number of dwellinghouses inspected for housing defects (under Public Health or Housing Acts) ... .. 366
  - (b) Number of inspections made for the purpose ... .. 1,129
- Number found not to be in all respects reasonably fit ... .. 191
- Remedy of Defects during the year without service of Formal Notices:  
Number of defective dwellinghouses rendered fit in consequence of informal action by the Local Authority or their Officers ... 136
- Action under Statutory powers during the year:—
  - (a) Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936:—

(1) Number of dwellinghouses in respect of which notices were served requiring repairs ... ..	37
(2) Number of dwellinghouses which were rendered fit after service of formal notices:—	
(a) By Owners ... ..	6
(b) By Local Authority in default of Owners ... ..	10
(b) Proceedings under Public Health Acts:—	
(1) Number of dwellinghouses in respect of which notices were served requiring defects to be remedied ... ..	*12
(2) Number of dwellinghouses in which defects were remedied after service of formal notices:—	
(a) By Owners ... ..	1
(b) By Local Authority in default of Owners ... ..	Nil.

[\*In addition to these, 15 Notices were served under Section 75 of Public Health Act, 1936, requiring provision of new dustbins.]

### INSPECTION AND SUPERVISION OF FOOD SUPPLIES.

#### Milk Sampling.

##### *Accredited Producers—*

Number of samples taken ... ..	3
Number of samples satisfactory ... ..	3
All samples submitted to Methylene Blue and Coliform Tests.	

##### *Pasteurised Milk—*

Number of samples taken ... ..	7
Number of samples satisfactory ... ..	6
One sample failed to pass the Methylene Blue Test.	

##### *Undesignated Milk—*

Number of samples taken ... ..	30
Number of samples satisfactory ... ..	17

#### Ice-cream Sampling.

Number of samples taken ... ..	14
Number of samples satisfactory ... ..	10

#### Meat and Other Foods.

Number of inspections ... ..	190
Total weight of meat and other foodstuffs condemned:—	
Tons.      Cwts.      Qrs.      Lbs.	
2      ...      8      ...      0      ...      10½	

#### Knackers Yards.

Number of premises ... ..	1
Number of inspections ... ..	24

### PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES.

#### Generally.

The incidence of notifiable diseases was very light.

The number of cases of Measles was much smaller than in the previous year. Any medical practitioner requiring Measles Prophylactic for use among his patients was supplied by the Department free of cost.

Whooping Cough was more prevalent than in 1945, but not to any serious extent.

#### Diphtheria.

It is regrettable to have to record a death from Diphtheria in a schoolchild whose parents had neglected to present her for full immunisation. Despite several invitations, the girl was not brought again after receiving a first injection, and was then struck down by the virulent type of Diphtheria germ. Parents who do not avail themselves of the health services provided for their children incur a heavy responsibility. I should like to see Diphtheria Immunisation of all children made compulsory.



## Diphtheria Immunisation.

In November, 1945, responsibility for Diphtheria Immunisation throughout the country was placed on Welfare Authorities by the Minister of Health. Consequently in Brentwood the Essex Council Council became the authority for Diphtheria Immunisation, but being satisfied with existing local arrangements, they have made no change in the procedure by which the work is done by me at the Combined Treatment Centre. Eleven years have now elapsed since Diphtheria Immunisation was initiated in Brentwood. The object is to immunise every child as soon after the age of nine months as possible. Thereafter, as a minimum, to give a further protective injection (known as a "Boosting" dose) at five years—that is to say, on attaining school age—and another protective injection at about ten years. Unfortunately, many parents do not yet seem to appreciate the importance of these boosting doses, and constant propaganda is desirable.

Attendances at the immunisation clinic were as follows:—

Number of children who received their second injection ... ..	19	} 202 immunisation completed.
Number of children who received both injections ... ..	183	
Number of children who received their first injection ... ..	12	
Number of children who received a "boosting" injection ... ..	140	
Total number of children treated ...	354	
Total number of injections given ...	537	

## Malaria.

Two cases of Malaria were notified. One was a relapse of an infection acquired in Burma. The other, a Dutch boy, was considered, after investigation, to have been infected here. He had never had Malaria in Holland, nor in this country until he came to Essex. It was found that he had slept in a bedroom in Brentwood the last occupant of which had suffered from Malaria when abroad some months before. The unusually warm Spring weather had probably activated a mosquito hibernating in the house to bite first the one, and later the other. The parasite was of the Benign Tertian variety. The Ministry of Health took an interest in this case, and asked me for a report. In my monthly report to the Health Committee in May, 1946, I included some notes on the possibilities of Malarial infection in this country.

## Smallpox.

With the influx into this country of large numbers of service personnel and others from overseas, information was sent to me from time to time of Smallpox contacts proceeding to this Urban District after vaccination. Such people were kept under regular observation.

A Naval Petty Officer, on leave in another district, visited relations in Brentwood on two successive days. Three days later I was informed that he had developed modified Smallpox, whereupon known contacts here were vaccinated.

A case of suspected modified Smallpox in a child recently returned to Brentwood from Persia, was seen by me in consultation at the request of a local medical practitioner. This was actually a case of Chickenpox, and was so subsequently confirmed by the County Skin Specialist.

## Scabies Clinic.

The majority of cases treated have been women and children, and the Nurse in Charge, Mrs. H. M. Eccleston, has done good work—turning up whenever required and often at hours in the evening not very convenient to her. The same prompt attendance cannot, unfortunately, be credited to some of the patients, who, having been given an appointed time, have not bothered to turn up. This causes a waste of time and fuel, and requires the fixing of another appointment.

When men require treatment, a male attendant is provided.



The treatment consists of a hot bath with plenty of scrubbing, followed by painting of the entire body with Benzyl Benzoate. Only a few cases have needed a second application of this medicament.

The numbers of cases dealt with are as follows:—

Men.	Women.	Boys.	Girls.	Total.
10	24	30	34	98

### MISCELLANEOUS.

#### Foot Clinic.

Mr. Sidney Harris, the Chiropodist, has continued to do useful work in this Clinic, which is held on Mondays and Tuesdays from 9 a.m.—12 noon, 1 p.m.—4 p.m. and 4.30 p.m.—7 p.m., and on Saturdays from 9 a.m.—12 noon.

It was found necessary to amend the charges to the Public as follows, and to institute a booking fee of one shilling (to be deducted from the subsequent fee for treatment) owing to the slackness of patients in keeping their appointments, which wastes the time of the Chiropodist. Failure to attend now entails a further booking fee and forfeiture of the previous one.

#### Table of Fees—

Adults—First and Subsequent Visits—Both feet	3s. 0d.
One foot	2s. 0d.
Children suffering from Plantar Warts, per visit	1s. 0d.
Old Age Pensioners ... .. per visit	6d.

#### Table of Attendances—

Records of attendance at this Clinic are kept in four-weekly periods. The following figures, therefore, show the number of persons treated between 8th December, 1945 and 10th December, 1946:—

New Patients.						Attendances by—				
Adults.		Children.		Old Age Pensioners.		New Patients.	Old Patients.		Total Attendances.	
M.	F.	M.	F.	M.	F.					
44	143	2	21	19	39	...	268	2,717	...	2,985

#### Swimming Pools.

The following samples were taken from swimming pools and submitted to bacteriological and chemical examination:—

	Satisfactory.	Unsatisfactory.
Brentwood Urban District Council	2	—
County High School for Girls	2	—
Brentwood School	1	2
Ursuline High School	1	—
Totals	6	2

Failure to reach a satisfactory standard on two occasions at Brentwood School was due to deficient chlorination. The possibility of providing better arrangements is engaging the attention of the School Governors.

#### Factories Act, 1937.

##### 1. Inspection—

Premises.	Inspections.	Number of Notices served.	Notices complied.
Factories (Power)	14	3	2
Factories (Non-Power)	14	1	1

##### 2. Defects Found—

Particulars	Found.	Remedied.
Lack of cleanliness	1	1
Defective Sanitary Accommodation	1	1
Insufficient Sanitary Accommodation	2	1

##### 3. Outworkers—

Number of Outworkers	10
Number of Inspections	4

## ANALYSIS OF NOTIFIABLE DISEASES UNDER AGE GROUPS.

Diseases.	Age Groups.											
	Under 1	1—2	2—3	3—4	4—5	5—10	10—15	15—20	20—35	35—45	45—65	65 and over. Totals.
Scarlet Fever ...	—	1	3	2	3	5	5	1	1	—	—	21
Diphtheria ...	—	—	—	1	1	2	1	1	—	—	—	6
Puerperal Pyrexia ...	—	—	—	—	—	—	—	—	2	1	—	3
Pneumonia ...	—	—	—	—	1	1	—	—	—	3	—	10
Dysentery ...	—	—	—	1	—	—	—	—	—	1	1	4
Erysipelas ...	—	—	—	—	—	—	—	—	1	1	—	4
Cerebro-Spinal Meningitis	—	—	1	—	—	—	—	2	—	—	—	3
Whooping Cough ...	14	14	23	22	20	62	1	—	6	—	1	163
Measles ...	2	9	7	7	20	28	6	2	3	—	—	84
Jaundice ...	—	1	1	—	3	6	7	4	10	4	1	38
Malaria ...	—	—	—	—	—	—	1	—	—	1	—	2





